

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

June 29, 2006

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Planet Subs, 1332 'P' Street requesting a class I liquor license.

Planet Subs has requested that Paul Bowers be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Paul Bowers was born in Omaha, Nebraska. He attended Millard South High School graduating in 2000.

Mr. Bowers has been employed in the food service industry since 2000.

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules

Liquor License Investigation

Business (DBA) PLANET SUBS

☒ Manager Owner Other _____

Name: PAUL BOWERS

US Citizen ? ☒ Yes No

Has applicant ever been cited for liquor law violations ? ☒ No Yes
Explain _____

Does applicant have an interest in another liquor license ? ☒ No Yes
Explain _____

Is spouse qualified to hold a license ? Yes No ☒ N/A

How is applicant if not an owner to be paid ? ☒ Salary Hourly

How many hours will applicant be at the establishment ? 55+

Any other employment ? ☒ No Yes, explain _____

Any previous experience with a liquor license ? ☒ Yes No

Any criminal convictions ? ☒ No Yes
Comments _____

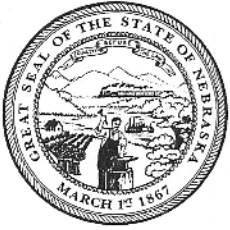
Is applicant a property owner in Lincoln ? Yes ☒ No

Is applicant involved in any civil litigation ? ☒ No Yes
Comments _____

☒ Photo ☒ Records Check ☒ References

Comments _____

Interview Date 6/29/06



Dave Heineman
Governor

set date: 7/10
PH: 7/24
STATE OF NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)
web address: <http://www.lcc.ne.gov/>

June 23, 2006

A6-066438
94

Lincoln City Clerk
555 S. 10th Street
Lincoln, NE 68508

RE: Application for Class I License for Planet Subs Nebraska, LLC. DBA Planet Subs

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) Publicize one time no less than 7 days, and no more than 14 days prior to date of hearing.
- 2) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE PROPERLY LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

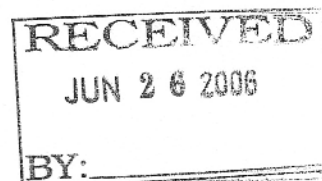
Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Katie Lanning
Licensing Division
Enclosure
Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner



An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

RECOMMENDATION OF THE NEBRASKA LIQUOR CONTROL COMMISSION

Date Mailed from Commission Office: June 23, 2006

I, _____ Clerk of _____
(City, Village or County)

Nebraska, hereby report to the Nebraska Liquor Control Commission in accordance with Revised Statutes of Nebraska, Chapter 53, Sec. 134 (7) the recommendation of said city, village or county, as the case may be relative to the application for a license under the provisions of the Nebraska Liquor Control Act as applied for by:

Planet Subs Nebraska, LLC. DBA Planet Subs**1332 P Street, Lincoln, NE 68508 – Lancaster County****Application for Class I – 73372****45th day 8/7/06**

1. Notice of local hearing was published in a legal newspaper in or of general circulation in city, village or county, one time not less than 7 nor more than 14 days before time of hearing.

Check one.....Yes _____ No _____

The Statutes require that such hearing shall be held not more than 45 days after the date of receipt of this notice from the Commission.

2. Local hearing was held not more that 45 days after receipt of notice from the Nebraska Liquor Control Commission.

Check one.....Yes _____ No _____

3. Date of hearing of Governing Body: _____

4. Type or write the Motion as voted upon by the Governing Body. If additional Motions are made by the Governing Body, then use an additional page and follow same format.

5. Motion was made by: _____ Seconded by: _____

6. Roll Call Vote: _____

7. Check one: The motion passed: _____ The motion failed _____

8. If the motion is for recommendation of denial of the applicant, then list the reasons of the governing body upon which the motion was made.

(Attached additional page if necessary)

SIGN HERE _____ **DATE** _____

clerks signature

73372

K1

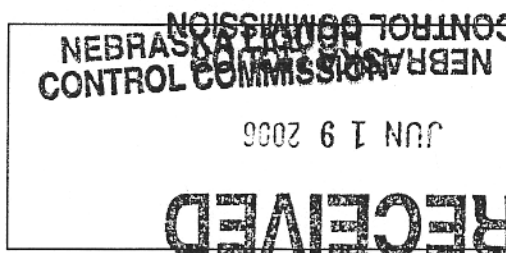
Locals
Class I-73372
Kc

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JUN 19 2006

APPLICATION FOR LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov



OFFICE USE ONLY

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES
CHECK DESIRED CLASS(S)

RETAIL LICENSE(S)

- | | | | |
|-------------------------------------|---|---|---------|
| <input type="checkbox"/> | A | Beer, On Sale Only | \$45.00 |
| <input type="checkbox"/> | B | Beer, Off Sale Only | \$45.00 |
| <input type="checkbox"/> | C | Beer, Wine & Distilled Spirits, On & Off Sale | \$45.00 |
| <input type="checkbox"/> | D | Beer, Wine & Distilled Spirits, Off Sale Only | \$45.00 |
| <input checked="" type="checkbox"/> | I | Beer, Wine & Distilled Spirits, On Sale Only | \$45.00 |

Class K Catering license may be added to any of these classes with an additional fee of \$100.00 and filing form 35-4202

MISCELLANEOUS

- | | | | Bond |
|--------------------------|---|--|----------------------|
| <input type="checkbox"/> | L | Craft Brewery (Brew Pub) | \$295.00 1,000 min. |
| <input type="checkbox"/> | O | Boat | \$ 95.00 N/A |
| <input type="checkbox"/> | V | Manufacturer, Beer, Wine & Distilled Spirits
(additional fee of \$100 to \$1,000-call for exact amount) | \$ 45.00 10,000 min. |
| <input type="checkbox"/> | W | Wholesale Beer | \$545.00 5,000 min. |
| <input type="checkbox"/> | X | Wholesale Liquor | \$795.00 5,000 min. |
| <input type="checkbox"/> | Y | Farm Winery | \$295.00 1,000 min. |

All Class C licenses expire October 31st

All other licenses expire April 30th

Catering expire same as underlying retail license

TYPE OF APPLICATION BEING APPLIED FOR (CHECK ONE)

- ☐ Individual License, requires insert form 1
- ☒ Partnership License, requires insert form 2
- ☒ Corporate License, requires insert form 3a and manager application 3b

NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION

(Commission will call this person with any questions we may have)

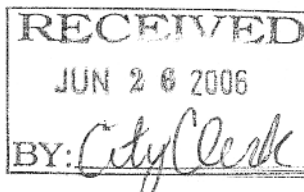
Name: Christopher OConnor

Phone: (913) 219-0115

Firm Name: Planet Subs Nebraska LLC

Firm address: 215 W. 68th Street Kansas City, MO

fee # 280651
Bus No # - 45-mm



PREMISE INFORMATION

Trade Name (doing business as) Planet Sub

Street Address #1 1332 P Street

Street Address #2 _____

City Lincoln County Lancaster

Zip Code 68508

Telephone number at premise to be licensed (402) 817-3834

Is this location inside the city/village corporate limits: ☒ YES ☐ NO

Mail to Address (where you want receipt of Liquor Control Commission mailings)

Name: Gary Moen

Street Address #1 215 W. 68th Street Kansas City, MO

Street Address #2 _____

City Kansas City County Jackson

Zip Code 64113

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

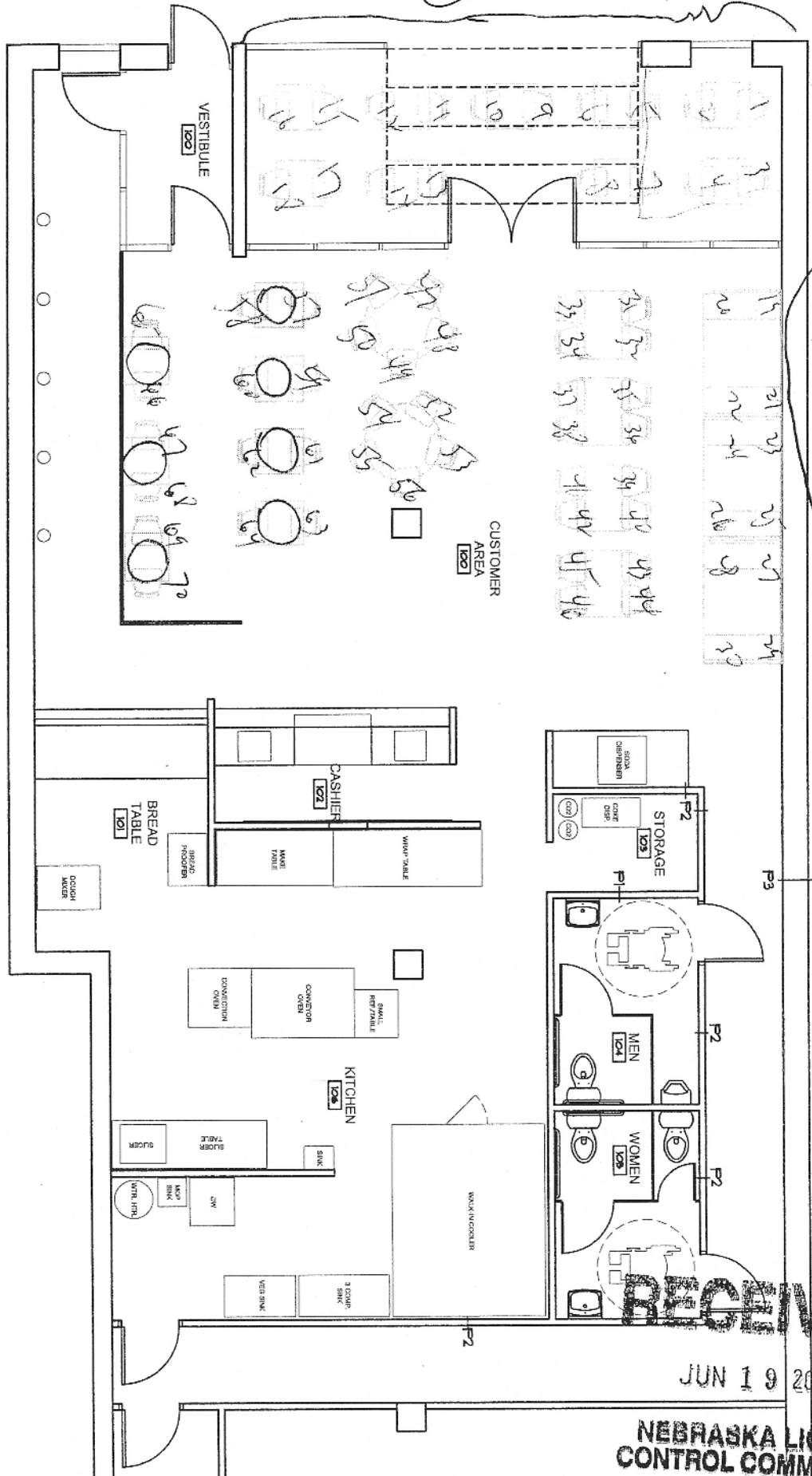
Main level of two story bldg.
Approx. 40' x 65' including sidewalk
Cafe' approx. 30' x 10'.
See attached

SIDE WALK
Cafe
30 x 10 FT

105

10 FT

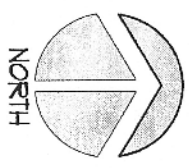
40 30



A

FLOOR PLAN

0' 4' 8' 12'
1/8" = 1'-0"



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NEBRASKA LIQUOR
CONTROL COMMISSION

APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

- ☐ Yes If yes, please explain below or attach a separate page.
☒ No

2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required). Liquor Inventory may be taken at time of application being submitted.

- ☐ Yes
Current business name and license number _____
☒ No

3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license. If yes, attach agreement. **Please note:** This agreement is not effective until Commissions assigns you a 3-digit ID number.

- ☐ Yes
☒ No

4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.

- ☒ Yes Cornhusker Bank
☐ No

5. Will any person or entity other than applicant be entitled to a share of the profits of this business? If yes, explain. All involved members must be disclosed on application.

☐

Yes

☒

No

6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.

☐

Yes

☒

No

7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain? (No silent partners)

☒

Yes Liquid 9 Investments LLC

☐

No

8. Are the premises to be licensed within 150 ft of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Neb. Rev. Stat. 53-177.

☐

Yes

☒

No

9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties.

☐

Yes

☒

No

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or make withdrawals on accounts at the institutions.

Cornhusker Bank

Gary Moen, Bridget Moen, Chris OConnor, Chris Sweetland, Joy Sweetland, Paul Bowers

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.

N/A

- ✓ 12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.

Paul Bowers
60 hours/wk

- ✓ 13. List the training or experience (when and where) of the person listed in #12 above in connection with selling and/or serving alcohol products.

10 years of restaurant experience in Lincoln, NE.

- ✓ 14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.

☒ Lease: expiration date December 1, 2010

☐ Deed

☐ Purchase Agreement

- ✓ 15. When do you intend to open for business? May 25, 2006

- ✓ 16. What will be the main nature of business? What are the anticipated hours of operation?

Sub sandwiches, 10am-2am

17. List the principal residence(s) for the past 10 years for all persons required to sign application, including spouses. If necessary attach a separate sheet.

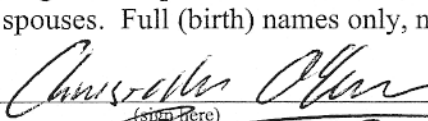
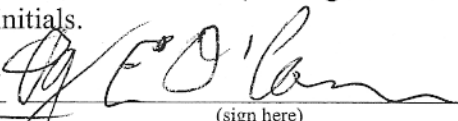
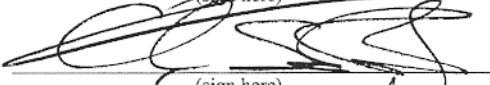
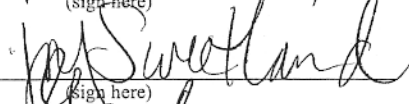
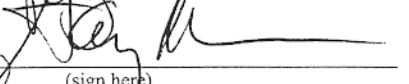
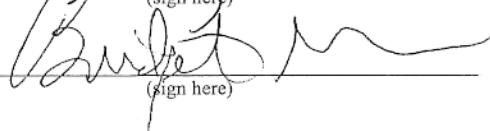
Applicant Name	From: Year	To: Year	City/State
--see attached--			

The undersigned applicant(s) hereby consent(s) to a background investigation and release present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance

of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

 (sign here)	 (sign here)
 (sign here)	 (sign here)
 (sign here)	 (sign here)
 (sign here)	 (sign here)
 (sign here)	 (sign here)

Subscribed in my presence and sworn to before me this

16th day of June, 2006



Notary Public Signature & Seal



In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4010
REV. 4/05

PAST 10 YEARS ADDRESSES

Gary & Bridget MOEW

215 WEST 68th Street
Kansas City, MO 64113
2003 - Present

420 Stablestone Drive
Chesterfield, MO 63017
1999 - 2003

16578 Birch Forest Drive
Willwood MO 63011
1995 - 1999

Chris O'Connor
4607 W 60th Street
Fairway, KS 66205
2004 - Present

523 W 12th Street
Kansas City, MO 64112
2001 - 2004

4613 W 60th Street
Fairway, KS 66205
2000 - 2001

8522 Schweiger Ct
Lenexa, KS 66219
1996 - 2000

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JUN 19 2006

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Chris & Joy Sweetland
5519 Roe Blvd
Roeland Park, KS 66205
2004 - Present

3166 Woodview Ridge
Roeland Park, KS 66205
2000 - 2004

407 E 10th Street
Wayne, NE 68787
1996 - 2000

**APPLICATION FOR LIQUOR LICENSE
CORPORATION/LLC INSERT - FORM 3a**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: <http://www.lcc.ne.gov/>

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JUN 19 2006

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Name of Corporation or Limited Liability Company that will hold license. Attach copy of Articles of Incorporation. (Document must show [barcode] receipt by Secretary of States Office.

Planet
~~Planet~~ Subs Nebraska LLC

Corporate Street Address: 215 W. 68th Street Kansas City, MO

City: Kansas City State: MO Zip Code: _____

Corporate Telephone Number 816-444-0617

Total number of shares issued (if corporation) _____

Is this a Non Profit Corporation? ☐ YES ☒ NO

If yes, what is your Federal ID #? _____

Name of Registered Agent Gary Moen

Name of Proposed Manager Paul Bowers

This person must complete form 35-4013

List name of Chief Executive Officer

Last Name: Moen First Name: Gary MI R

Address Street 21 W. 68th Street City Kansas City

State MO Zip Code _____ Home Phone number 816-444-0617

Social Security Number _____ Date of Birth 01/01/1971

List names of all Officers, Directors, Stockholders, Members and their Spouses

Last Name Moen First Name Bridget

prints Social Security Number ~~512-002-0843~~ Date of Birth

Title Member Number of Shares N/A

Spouse Name (indicate N/A if single) Gary Moen

prints Spouse Social Security Number ~~512-042-3662~~ Date of Birth 1/1

Title CEO Number of Shares N/A

prints Last Name OConnor First Name Christopher

Social Security Number Date of Birth

Title Member Number of Shares N/A

Spouse Name (indicate N/A if single) Paige OConnor

fidant Spouse Social Security Number Date of Birth

Title ~~spouse~~ spouse Number of Shares N/A

prints Last Name Sweetland First Name Joy

Social Security Number Date of Birth

Title Member Number of Shares N/A

prints Spouse Name (indicate N/A if single) Chris Sweetland

Spouse Social Security Number Date of Birth 1/1

Title Member Number of Shares N/A


✓ Is this Corporation or Limited Liability Company controlled by another Corporation?

☐ Yes ☒ No

If yes, give name of corporation and supply organizational chart

✓ Indicate tax year with the IRS

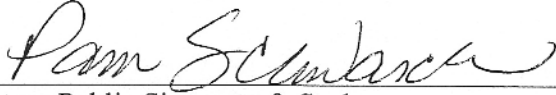
Starting Date 01/01/2006 Ending Date 12/31/2006

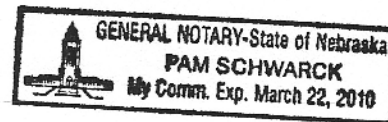
✓ 
Signature of President/Managing Member

Notary Public Signature & Seal

Subscribed in my presence and sworn to before me this

6 day of June, 2006


Notary Public Signature & Seal



In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

RECEIVED

JUN 19 2006

NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. The undersigned individual will also be waived of filing fingerprint cards, however, will be required to disclose any violation(s) on all applications and sign all necessary documents.

[Signature]

Signature of Spouse Asking to be Waived



SUBSCRIBED in my presence and sworn to before me this 16th day
of June, 2006.

[Signature]

Signature of Notary Public

The applying individual, whose spouse is requesting to be waived, understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]
*Signature of applying individual
(spouse of individual listed above)

Christopher O'Connor
Print name of applying individual

SUBSCRIBED in my presence and sworn to before me this 16th day
of June, 2006.



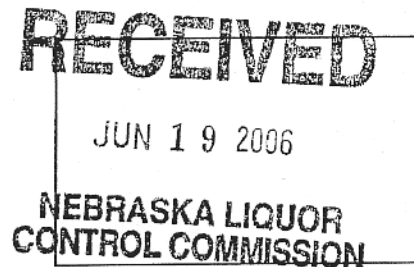
[Signature]

Signature of Notary Public

*spouse of individual listed above is the individual required to sign bottom portion of affidavit

APPLICATION FOR LIQUOR LICENSE
CORPORATION MANAGER - FORM 3b
MUST BE A NEBRASKA RESIDENT

301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: <http://www.lcc.ne.gov/>



LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION Planet Subs Nebraska LLC

CLASS & LICENSE NUMBER _____

TRADE NAME Planet Sub

STREET ADDRESS 1332 P Street

CITY Lincoln

Gray
** [Signature]*
SIGNATURE OF CORPORATION PRESIDENT/CEO

APPLICANT INFORMATION (MUST BE 21 OR OVER AND NEBRASKA RESIDENT)

PMBS
NAME Paul Bowers

ADDRESS 3410 Allendale Dr,

CITY Lincoln

STATE NE

ZIP CODE 68516

HOME PHONE NUMBER 402-208-5763

BUSINESS PHONE NUMBER (402) 817-3834

SEX ☒ MALE ☐ FEMALE

SOCIAL SECURITY NUMBER _____

DATE OF BIRTH 1.1.1

PLACE OF BIRTH Omaha, NE

DRIVERS LICENSE NUMBER & STATE _____

SPOUSES INFORMATION (IF NOT MARRIED INDICATE)

SPOUSE NAME --single--

SOCIAL SECURITY NUMBER _____

DATE OF BIRTH _____

DRIVERS LICENSE NUMBER & STATE _____

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ YES ☒ NO

If yes, please explain below or attach a separate page.

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

☐ YES ☒ NO

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

☐ YES ☒ NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

☒ YES ☐ NO

5. Have you filed fingerprint cards and PROPER FEES (if check, make out to the NE State Patrol), with this application?

☒ YES ☐ NO

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

APPLICANT: CITY & STATE	YEAR FROM TO	SPOUSE: CITY & STATE	YEAR FROM TO

EMPLOYERS - LIST LAST TWO EMPLOYERS

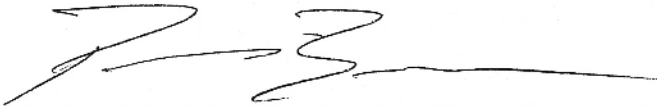
MONTH/YEAR FROM TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER

**PERSONAL OATH AND CONSENT OF INVESTIGATION
MUST BE SIGNED BY APPLICANT & SPOUSE**

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.



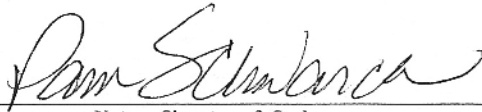
Signature of Applicant



Signature of Spouse

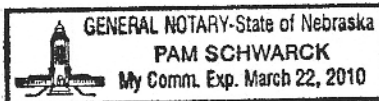
Subscribed in my presence and sworn to before me this 16
day of June 2006.

Subscribed in my presence and sworn to before me this _____
day of _____.



Notary Signature & Seal

Notary Signature & Seal

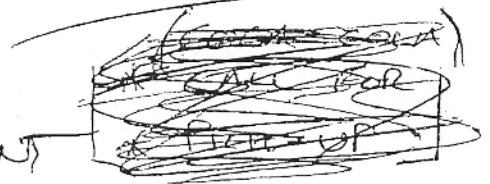


PAUL BOWEN
ADRESSES

PAGE 2 of 2

3410 ALLENDALE DR.
LINCOLN, NE 68516

CURRENT



5210 S 40th #48C
LINCOLN, NE 68521

03

06-22-06P04:08 RCVD

1503 SUPERIOR ST #4
LINCOLN, NE 68516

02

15551 ADAMS ST #203
OMAHA, NE ~~68137~~ 68137

15551 ADAMS ST #301
OMAHA, NE 68137

96-0

96-02

13414 REDWOOD ST
OMAHA, NE 68138

88-96

EMPLOYERS

— BUNKERS HIGH MARK BANQUET
8901 AUGUSTA DR
Lincoln, NE 68521 2005-2006

— ~~LAZLO~~ LAZLOS
59th + OLD CHENEY
Lincoln, NE 68516 2004-2005

STATE OF

NEBRASKA

United States of America,
State of Nebraska } ss.



Department of State
Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

the attached is a true and correct copy of the Articles of Organization
of

PLANET SUBS NEBRASKA LLC

with its registered office located in LINCOLN, Nebraska, as filed in
this office on June 22, 2006.

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the State
of Nebraska on June 22, 2006.


SECRETARY OF STATE

